PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003 10808529

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CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		R THAN ENTITY
TOTAL CLAIMS			LU			•	·	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FE	
T	OTAL CHARGE	EABLE CLAIMS	(o minus 20=		. Ø			X\$ 9=	1	OR	X\$18=	
INDEPENDENT CLAIMS			/ in	ninus 3 =	· \$			X43=	 	1	Yes	
М	JLTIPLE DEPE	NDENT CLAIM F	PRESENT		<u> </u>					OR	700-	
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=	_	OR	+290=	<u></u>
CLAIMS AS AMENDED - PART II								TOTAL	317	OR	TOTAL	<u></u>
	•	(Column 1)	AMENDE	ا PAH - ر Colum)		(Column 3)	3) SMALL ENTIT			OR	OTHEF SMALL	
Т	1	CLAIMS	1	HIGHE		(00:0:::::0)				-		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
<u> </u>	FIRST PRESI	ENTATION OF M	ULTIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=	
1							L,		1			
•			TOTAL		OR ,	TOTAL						
							Al	DDIT. FEE		10	ADDIT. FEE	
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_		CLAIMS		HIGHE	ST		Г		ADDI	1 г		
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5		AFTER	1	PREVIOL		EXTRA		RATE	TIONAL	!!	RATE	TIONAL
삗		AMENDMENT		PAID F	OR				FEE	l L		FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LIPLE DEP	ENDENT C	CLAIM		┢			l∽∵F		
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(Column 1) (Column 2) (Column 3)												
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<u>₹</u>	Total .	*	Minus	**		=		X\$ 9=		<u>.</u>	X\$18=	FEE
NIMICINOMIEN .	ndependent	*	Minus	***		=	\vdash			OR	-	
٠ [[FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=		OR	X86=	1
				0								
	ha		145=	ŀ	OR.	+290=						
** }{	ne entry in colun	nn 1 is less than the	entry in colum	n 2, write "0	in colu	mn 3.		TOTAL		_ L	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
Th	e *Highest Numl	ber Previously Paid	For (Total or I	ndependent)	is the h	nighest number f	ound	in the appr	opriate box	in colun	nn 1.	
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